

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.  | DATE       |
|---------------------------|----------|---------|------------|
| FEE DETERMINATION         | WA       | 70591   | 9/10       |
| O.I.P.E. CLASSIFIER       |          |         | 10-9-14-00 |
| FORMALITY REVIEW          |          |         |            |
| RESPONSE FORMALITY REVIEW |          | 6-16-94 | 10-24      |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
 staple additional sheet here

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